

## **HAWAII STATE ETHICS COMMISSION**

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## LOBBYIST REGISTRATION FORM STATE OF HAWAII

(Type or Print Clearly)

PARTI LOBBYIST			
NAME (Last)	(First)	(Middle)	TELEPHONE
PAVLICEK	MELISSA	TEVES	(808) 447-1840
MAILING ADDRESS (Street)	FAX (808) 523-3712		
841 BISHOP STREET, S	EMAIL MPAVLICEK@HAWAIIPUBLICPOLICY.		
(City)	(State)		(Zip Code)
HONOLULU	HAWAII	96813	
EMPLOYING ORGANIZATION (Fill in	) TELEPHONE		
HAWAII PUBLIC POLIC	(808) 447-1840		
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841 BISHOP STREET, S	EMAIL INFO@HAWAIIPUBLICPOLICY.COM		
(City)	(State)		(Zip Code)
HONOLULU	HAWAII		96813

PART II ORGANIZATION		
NAME OF ORGANIZATION YOU LO	TELEPHONE	
HAWAIIAN AIRLINES	(808) 835-3700	
MAILING ADDRESS (Street)	FAX (808) 835-3690	
PO BOX 30008		EMAIL
(City)	(State)	(Zip Code)
HONOLULU	HAWAII	96820
NAME OF PERSON RESPONSIBLE FOR	TELEPHONE	
ANN BOTTICELLI	(808) 835-3700	
MAILING ADDRESS (Street)		FAX (808) 835-3690
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(City)	(State)	(Zip Code)
HONOLULU	HAWAII	96820

LREG 09/2009

PART III DESCRIPTION OF SUBJECTS UPON WHICH YOU EXPECT TO LOBBY					
☐ Agriculture	Education	☐ Human Services	Science, Technology & Economic Development		
Communications & Public Utilities	Government Operation & Finance	<ul><li>Intergovemmental Relations, International Affairs</li></ul>	√ Tourism & Recreation		
Consumer Protection & Commerce	Hawaiian Affairs	Labor & Employment	<b>✓</b> Transportation		
Culture, Arts, Historic Preservation	☐ Health	<ul><li>Planning, Land &amp; Water</li><li>Use Management</li></ul>	Other: (indicate below)		
Ecology, Energy Environmental Protection	☐ Housing	Public Safety & Corrections			
PART IV CERTIFICATION					
I hereby certify that th	e information furnished abov	e is, to the best of my knowle	edge, correct and complete.		
Muli Davice 1 128/13					
	(Signature of Lobbyist) (Date)				
			,		
PART V AUTHORIZAT	ION TO LOBBY				
NAME	TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED				
ANN BOTTICELLI	SENIOR VP, PUBLIC AFFAIRS				
NAME OF ORGANIZATION (if a	applicable)		TELEPHONE		
HAWAIIAN AIRLINES			(808) 835-3700		
MAILING ADDRESS (Street)			FAX (808) 835-3690		
PO BOX 30008			EMAIL ANN.BOTTICELLI@HAWAIIANAIR.COM		
(City)	(State)		(Zip Code)		
HONOLULU	HAWAII		96820		
I hereby authorize the above, named person to engage in lobbying activities on behalf of the undersigned.					
(Signature of Authorizing Officer or Person Represented) (Date)					